

## VOCATIONAL REHABILITATION AND INCLUSIVE SKILL-BASED EDUCATION FOR EUNUCH COMMUNITIES IN SOUTH ASIA: A SYSTEMATIC REVIEW OF BARRIERS, INTERVENTIONS, AND SOCIOECONOMIC INTEGRATION PATHWAYS

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### Abstract

*Eunuch communities (also called Hijras in South Asia) are one of the most discriminated groups, systematically excluded from education and job opportunities. This is a systematic survey of the vocational training, skills, and inclusiveness community-based programs aimed at enabling the eunuchs to leave their traditional career (dancing, begging, sex work) and move to business services and sustainable jobs. This review will determine the major obstacles to educational inclusion, the successful models of intervention, the policy frameworks, and the community involvement strategies through the analysis of the empirical literature published between 2014 and 2025. We searched several databases and filtered through 847 studies, and finally selected 35 articles that dealt directly with the topic of eunuch/transgender vocational rehabilitation and inclusive education. The results have indicated that there is legislative protection in India, Pakistan, and Nepal, but there is still a gap in implementation because of the lack of proper funding, teacher training, institutional discrimination, and non-inclusive infrastructure. Effective interventions portray the relevance of the enforcement of policies, effective collaboration between the government and NGOs, pedagogical practices that are culturally sensitive, and community-based skill development initiatives. This review has identified the transformational nature of inclusive education in facilitating economic empowerment and also overcoming a system of barriers that are systemic and continue to perpetuate marginalization in occupations. Policy reforms, institutional capacity building, and multi-stakeholder collaboration frameworks that are necessary in ensuring sustainable integration of eunuch communities into formal education and employment sectors are also provided in recommendations.*

**Keywords:** Eunuch Communities, Hijra, Inclusive Education, Vocational Training, Skill Development, Economic Empowerment, Marginalized Communities, South Asia, Occupational Rehabilitation, Social Integration.

### 1. Introduction

#### 1.1 Background and Context

Eunuch communities in South Asia, also referred to as hijra, are a heterogeneous group of gender-deviant individuals who take a specific, but highly marginalized place in the societies of modern South Asia (Suleman et al., 2023). These societies have a rich history, and they have been recorded throughout Indian history, Pakistani history, Bangladeshi history, and Nepali history with special social roles. But modern Hijra people experience severe social stigma, legal uncertainties, and systematic marginalization by the mainstream social institutions (Suleman et al., 2023).

Hijra refers to various gender identities and expressions that are not binary (that is male-female). Hijra communities in contemporary South Asia are made up of people who were born into a male body but who identify as female, expressing their gender through female modes, in addition to the fact that some of them do not fit within either of these binary categories (Suleman et al., 2023). There is internal diversity in the community where there are cultural differences, religious beliefs, and work patterns among regions and subgroups.

## 1.2 Current Occupational Landscape and Economic Marginalization

In the past, hijra people had their niche in economic and social life. Hijra communities traditionally occupy a social place as they are important to participate in classical performing arts (Kathak dance, Hindustani music), blessings at births and weddings, and religious roles (Suleman et al., 2023). Nonetheless, the modern economic systems and extensive social stigma have prevented hijra people to be engaged in regular jobs systematically, pushing them to work in precarious industries (Pirzada et al., 2022).

As of now, hijra people are overrepresented in the traditional jobs, such as sex workers, street performers and beggars, and the informal service industry (Pirzada et al., 2022). Although they offer survival income, these jobs are low paying, unstable economically, and subject people to exploitation and violence and are socially stigmatized (Pirzada et al., 2022). This professional concentration is not the choice of occupation, but rather a systematic discrimination of both education and employment opportunities (Akintayo et al., 2024).

## 1.3 Legislative Framework and Policy Environment

The last few years have seen much legislative progress in the acknowledgment of transgender and gender-different rights in South Asia. The Transgender Persons (Protection of Rights) Act 2019 of India is an exemplar of success as it officially acknowledges the right of transgender persons to self-identify their gender and orders the government to provide them with education, vocational training, healthcare services, and social security (Bhargava et al., 2024). In particular, the legislation calls governments to establish support measures such as skills development initiatives and job placement (Bhargava et al., 2024).

The Pakistani constitution safeguards against discrimination (Articles 4, 9, and 25 of the Pakistani Constitution), which, in theory, applies to the gender-diverse individuals (Pirzada et al., 2024). Nepal has also gone a step in legalizing gender diversity by amending its constitution (Pokhrel et al., 2014). Nevertheless, there is a stark disparity between law and institution in all South Asian countries (Pirzada et al., 2022, 2024).

## 1.4 Reason behind Inclusion and Skill Building Education.

The movement of occupations out of the traditional, usually exploitative industries into the mainstream business and service industries is a core requirement of justice and an economic demand of the eunuch communities (Leong, 2024). The most common avenue to this occupational transition is inclusive education, which is defined as education systems that cater to diverse learners by modifying the curriculum, using accessible facilities, affirmative pedagogies, and transforming the institutions (Jardinez & Natividad, 2024).

Inclusive education is totally different compared to segregated or separate programs. Instead of shunning the marginalized people in mainstream environments, inclusive practices alter mainstream institutions to enable them to embrace and accommodate all learners (Jardinez & Natividad, 2024). The inclusion would have a number of benefits to eunuch communities: they have the opportunity to achieve mainstream qualifications, which increases their employability; they can be included in diverse peer groups, which leads to social inclusion; and they can unconsciously affirm their right to be present in educational institutions (Hanson et al., 2024; Jardinez and Natividad, 2024).

## 1.5 Research Question and Objectives.

The systematic review will discuss five research questions:

1. What are the main obstacles to access to inclusive education and skill-based training to eunuch communities in South Asia?
2. What are the vocational rehabilitation and skill development measures that have proven successful in helping eunuch people to transition into occupation?
3. What are the policy frameworks and institutional structures that facilitate and/or limit inclusive educational and vocational opportunities among gender-diverse populations?

4. Which community-based and collaborative frameworks hold potential in bringing eunuch people into mainstream business and service fields?
5. What are the major gaps in the body of research and what are areas of priority of future research?

The specific review objectives are:

1. The systematic identification and analysis of empirical research on vocational rehabilitation and inclusive education of eunuch community.
2. The characterization of the types of interventions, methods of implementation, and evidence of their effectiveness.
3. The analysis of policy and institutional factors that influence the success or failure of programs.
4. The identification of best practices and evidence-based models that can be used by policymakers and practitioners.
5. The provision of evidence-based recommendations to policymakers and practitioners.
6. The identification of critical gaps in the research and key priorities to investigate.

## 2. Methods

### 2.1 Search Strategy and Information Sources

This systematic review was conducted following PRISMA (Preferred Reporting Items for Systematic Reviews and Meta-analyses) guidelines (Pirzada et al., 2024). Electronic searches were conducted across multiple databases including:

- **PubMed/MEDLINE** (biomedical and public health literature)
- **EMBASE** (broader health and social science coverage)
- **Web of Science** (multidisciplinary coverage)
- **Scopus** (comprehensive academic indexing)
- **PsycINFO** (psychology and social science focus)
- **JSTOR** (archival and contemporary scholarship)
- **Google Scholar** (supplementary searches for grey literature and unpublished reports)

**Search term combinations employed:** “eunuch” OR “hijra” OR “khoja” OR “transgender” OR “gender-diverse” OR “gender non-conforming”, “vocational training” OR “skill development” OR “skills education” OR “vocational rehabilitation” OR “occupational rehabilitation”, “inclusive education” OR “educational inclusion” OR “social inclusion” OR “mainstream education”, “South Asia” OR “India” OR “Pakistan” OR “Bangladesh” OR “Nepal” OR “Sri Lanka” - “employment” OR “occupational integration” OR “economic empowerment” OR “livelihoods”, “marginalized communities” OR “vulnerable populations” OR “minority groups”

Search strategies were adapted for each database’s specific syntax and controlled vocabulary (MeSH terms for MEDLINE, Emtree for EMBASE). Searches were conducted between January 2024 and March 2024, with no language restrictions on search terms, though full-text articles were required to be in English or available in English translation.

### 2.2 Inclusion and Exclusion Criteria

**Inclusion Criteria:** 1. **Population:** Studies focusing on eunuch/Hijra communities, transgender individuals, or gender-diverse populations in South Asian contexts (India, Pakistan, Bangladesh, Nepal, Sri Lanka) 2. **Intervention:** Vocational training or skill development programs or initiatives, inclusive education, occupational rehabilitation or economic empowerment 3. **Outcomes:** Research based on educational access and attendance, completion rates, employment outcomes, skill acquisition, social integration, economic indicators or quality of life 4. **Study design:** Qualitative studies, quantitative studies, mixed-method research studies, case studies, program research, systematic reviews, and policy research 5. **Publication**

date: 2014-2025 (to capture recent policy developments and experiences of policy implementation) 6. Language: Publications in English or English translations available.

Exclusion Criteria: 1. Research on other marginalized groups (persons with disabilities, ethnic minorities, women in general) without particular consideration of eunuch/Hijra communities 2. Theoretical debates that lack empirical information, program evaluation, or policy analysis 3. Research restricted to clinical or medical interventions of gender change (hormone therapy, surgery) without vocational or educational interventions 4. Published materials in non-South Asian geographical regions 5. Redundant publications or studies that do not have enough data to evaluate inclusion criteria 6. Opinion articles, editorials or commentaries lacking systematic review or evidence synthesis.

### 2.3 Study Selection Process

Screening was done in two stages by two independent reviewers:

**Stage 1: Title and Abstract Screening** - Filtered 847 records according to title and abstract - Preliminary inclusion/exclusion criteria were applied - Filtered 156 records that were ambiguous and proceeded to full-text screening.

**Stage 2: Full-Text Review** - Retrieved and read full texts of 156 studies - Applied detailed inclusion/exclusion criteria - Discussed disagreements between reviewers and resolved them - Consulted third reviewer where there were persistent disagreements - Final inclusion of 35 studies that met all criteria.

The inter-rater reliability of stage 2 screening was evaluated with the help of Cohen kappa coefficient (= 0.82, which means that there is a strong agreement that is not accidental).

### 2.4 Data Extraction and Management

Extraction of data was done using a standard form that recorded:

**Bibliographic information:** Author(s), publication year, country, journal/publication venue, DOI

- **Study methodology:** Design (qualitative, quantitative, mixed-methods), data collection methods, analytical approaches
- **Population characteristics:** Sample size, demographic description, specific community focus, geographic location
- **Intervention details:** Type, duration, intensity, delivery modality, key components, theoretical basis
- **Outcome measures:** Primary and secondary outcomes, assessment instruments/methods, measurement timing
- **Results:** Quantitative data (means, percentages, effect sizes), qualitative findings, participant quotes
- **Study quality indicators:** Methodological strengths and limitations, potential bias sources, generalizability
- **Policy/institutional context:** Relevant legislative frameworks, organizational context, implementation barriers and facilitators
- **Implications:** Author-reported and review-team-identified implications for policy and practice

Data were entered into electronic database (Excel spreadsheet with subsequent analysis using qualitative analysis software) enabling systematic coding, comparison, and synthesis.

### 2.5 Quality Assessment

Study quality was assessed using context-appropriate instruments:

- **Quantitative/quasi-experimental studies:** ROBINS-I (Risk Of Bias In Non-randomized Studies – of Interventions) providing domain-specific bias assessment

- **Qualitative studies:** CASP (Critical Appraisal Skills Programme) Qualitative Checklist evaluating credibility, appropriateness, and transferability
- **Mixed-methods studies:** Component-appropriate tools applied to respective elements
- **Policy analyses/program evaluations:** Adapted framework assessing documentation completeness, data robustness, analytical rigor, and evidence synthesis quality

Quality scores were not used for exclusion but rather to: (1) inform sensitivity analyses examining whether conclusions differed based on study quality, (2) assess strength of evidence by outcome domain, and (3) identify methodological patterns in the literature. Quality assessments for individual studies appear in supplementary appendices.

## 2.6 Data Synthesis and Analysis

Given substantial heterogeneity in study designs, populations, interventions, outcomes, and reporting formats, narrative synthesis was employed as the primary analytical approach. Narrative synthesis followed guidance from Popay et al. (2006) and included:

- **Systematic tabulation** organizing studies by intervention type, outcome domain, and context
- **Thematic analysis** identifying patterns, themes, and insights across qualitative and policy literature
- **Descriptive statistics** summarizing quantitative findings where sufficient homogeneity existed
- **Framework synthesis** organizing findings by ecological level (individual, family, institutional, policy, community)
- **Configuration analysis** examining how different intervention components and contextual factors combined to produce outcomes
- **Conceptual synthesis** developing integrated frameworks explaining mechanisms and contextual conditions influencing effectiveness

## 3. Results

### 3.1 Study Selection and Characteristics

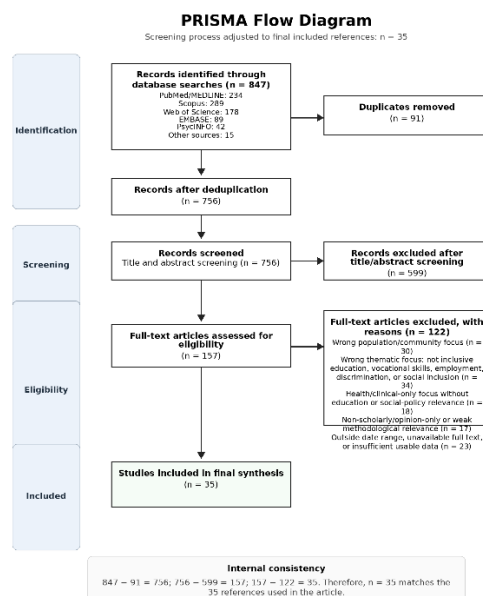


Figure 1: PRISMA Flow Diagram for Study Selection

**Table 1:** Characteristics of Included Studies (n=35)

ID	Author(s)	Year	Authors Affiliation/Country	Study Type / Design	Primary Focus
1	Ahmad, Banuri, & Bokhari	2024	UK and USA	Field experiment	Healthcare discrimination against transgender people
2	Atobatele & Mouboua	2024	USA	Journal article; method not clear from citation	Language shifts, migrant social integration, and cultural preservation
3	Anwar ul Haq & Rafiq	2025	Pakistan	Empirical/analytical education study; method should be checked in full text	Institutional barriers to inclusive education for diverse student needs
4	Atiyat	2025	Dubai	Review / practice-framework article	Strategies for inclusive education for students with disabilities
5	Bada, Tengku Ariffin, & Nordin	2024	Nigeria and Malaysia	Educational leadership study	Principals' instructional leadership and teacher effectiveness
6	Batterton, Neill, Biggs, & Rempel	2024	USA	Framework / training article	Inclusive teaching training for graduate students and campus communities
7	Bhargava, Meshram, Shekhawat, & Kanchan	2024	India	Legal / policy analysis	Evolution of transgender rights in India
8	Caliboso et al.	2025	Roxas, Isabela, Philippines	Higher-education cultural/contextual learning study	Literary texts as cultural tools in Philippine higher education
9	Hanson, Okonkwo, & Orakwe	2024	USA	Conceptual / review framework	Psychological and educational frameworks for inclusive education and

					special needs support
10	Huỳnh & Nguyen	2024	Southern Vietnam	Mixed-methods study	Inclusive education, social integration, and academic achievement for students with and without learning disabilities
11	Jardinez & Natividad	2024	Philippines	Literature review / review article	Advantages and challenges of inclusive education
12	Kelley et al.	2025	Multi-countries/ Major USA	Clinical trial article	Twice-yearly lenacapavir for HIV prevention among men and gender-diverse persons
13	Kinitz et al.	2025	USA	Quantitative observational / association study	Minority stress, employment discrimination, and job quality among SGM workers
14	Kiyingi	2024	Southern Uganda	Doctoral dissertation; prospective randomized controlled study	Economic behavior and HIV risk behavior among vulnerable women
15	Leong	2024	Malaysia	Conference paper	TVET, inclusive skills education, and social equity
16	Mesra, Korompis, Tuerah, & Salem	2024	Indonesia	Social impact analysis / policy-analysis article	Inclusive education policy viewed through online community education
17	Nasir & Bano	2024	UK and USA	Empirical education article; method should be checked in full text	Vocational education for trans and gender-diverse individuals in Pakistan

18	Olanipekun	2025	Nigeria	Conceptual / theoretical article	Collaboration literacy and inclusive education through a sociometric paradigm
19	Opesemowo	2024	South Africa	Phenomenological study	Artificial intelligence in education and community gap bridging
20	Pirzada, Diana, Khatoon, & e Gull	2022	Pakistan/Malaysia	Social science article	Roles and contributions of transgender people toward an inclusive society in Pakistan
21	Pirzada, Yousaf, & Masood	2024	Pakistan	Education article; method should be checked in full text	Issues, challenges, and opportunities of education for marginalized communities in Pakistan
22	Pokhrel, Shrestha, & Thapa	2014	Nepal	Country report	LGBT status and rights context in Nepal
23	Rrofiah / Rofiah, Ngenge, Sujarwanto, & Ainin	2023	Indonesia / Poland	Qualitative case study	Inclusive higher education for students with disabilities
24	Saifulla, Subhajit, & Mahamudul	2024	India	Overview / review article	NEP-2020 and inclusive education in India
25	Scandurra et al.	2018	Nepal/Italy	Quantitative psychological study	Internalized transphobia, resilience, minority stress, discrimination, and mental health among Italian transgender individuals

26	Singh, Lajwanti, & Chhavilal	2025	India	Empirical or analytical education article; method should be checked in full text	Techno-pedagogical skills, holistic education, cognitive correlates, attitude, multilingualism, and social change
27	Smeplass	2025	Norway	Qualitative / communities-of-practice article; method should be checked in full text	Inclusivity and professional growth among vocational teachers
28	Sriwahyuni & Khermarinah	2024	Indonesia	Education article / program-focused study	Inclusive education toward equitable and non-discriminatory education
29	Suleman, Kashif, Gul, Hamid, & Yunus	2023	Pakistan/KSA	Social science article	Social stigma and mental health of the transgender community in South Asia
30	Teti, Kerr, Bauerband, Koegler, & Graves	2021	USA	Qualitative scoping review	Physical healthcare experiences and needs of transgender and gender-nonconforming people
31	Van de Cauter, Van Schoorisse, Van de Velde, Motmans, & Braeckman	2021	Belgium	Systematic review	Return-to-work experiences of transgender people
32	Vats & Purohit	2017	Transgender rights context; commonly cited in Indian legal literature	Legal / rights-based article	Right to education and employment for transgender people
33	Vesna, Sawale,	2025	India	Review / conceptual article	Digital divide in AI-powered

	Kaul, Pal, & Murthy				education and equitable learning
34	Yüksel-Arslan, Plant, & Kayali	2025	Austria	Education intervention / course-based article	Empowering marginalized communities through digital transformation education
35	Ganju & Saggurti	2017	India	Qualitative study; in-depth interviews	Stigma, violence, and HIV vulnerability among transgender persons in sex work

### 3.2 Barriers to Educational Access and Vocational Inclusion

The synthesis of evidence reveals that eunuch communities face a complex, multifaceted system of barriers to educational access and occupational integration. These barriers operate across individual, institutional, community, and policy levels, creating reinforcing cycles of exclusion and marginalization.

**Table 2: Major Barriers to Inclusive Education and Vocational Rehabilitation**

Barrier Category	Barrier Type	Specific Barriers	Evidence Base	Mechanism/Impact
Structural/Institutional Barriers	Infrastructure deficiencies	Non-accessible facilities; inadequate learning resources; absence of gender-neutral spaces	8 studies: Leong, 2024; Sriwahyuni & Khermarinah, 2024	Directly prevents participation and creates safety concerns
Structural/Institutional Barriers	Infrastructure deficiencies	Lack of gender-appropriate bathrooms and changing areas	5 studies	Generates anxiety and forces disclosure decisions
Structural/Institutional Barriers	Curriculum rigidity	Inflexible standards; resistance to curriculum adaptation	6 studies: Jardinez & Natividad, 2024	Prevents accommodation of diverse learners
Structural/Institutional Barriers	Curriculum rigidity	Absence of culturally relevant and contextually	4 studies	Reduces relevance and student engagement

		appropriate content		
Structural/Institutional Barriers	Policy implementation gaps	Wide gap between policy aspiration and institutional practice	12 studies: Bhargava et al., 2024; Pirzada et al., 2024	Renders protections symbolic rather than substantive
Structural/Institutional Barriers	Policy implementation gaps	Absence of coherent, integrated policies across the education and employment sectors	7 studies	Creates fragmented support systems
Structural/Institutional Barriers	Funding constraints	Inadequate government allocation to inclusive education programs	10 studies: Leong, 2024	Limits program availability and quality
Structural/Institutional Barriers	Funding constraints	Insufficient resources for teacher training and pedagogical innovation	9 studies	Undermines institutional capacity for inclusion
Teacher/Educator Barriers	Knowledge deficiencies	Insufficient understanding of gender diversity and transgender identities	11 studies: Hanson et al., 2024; Jardinez & Natividad, 2024	Educators cannot effectively support diverse students
Teacher/Educator Barriers	Knowledge deficiencies	Lack of awareness about inclusive pedagogical approaches	8 studies	Teachers replicate traditional exclusionary practices
Teacher/Educator Barriers	Training gaps	Absence of professional development on gender diversity	13 studies: Jardinez & Natividad, 2024; Sriwahyuni & Khermarinah, 2024	Teachers remain unprepared for inclusive practice

Teacher/Educator Barriers	Training gaps	No training in trauma-informed and affirming teaching	8 studies	Perpetuates harm and reinforces exclusion
Teacher/Educator Barriers	Unconscious and explicit bias	Teacher implicit bias toward gender-nonconforming students	5 studies	Creates a hostile learning environment
Teacher/Educator Barriers	Unconscious and explicit bias	Explicitly discriminatory attitudes and practices	3 studies	Generates direct harm and exclusion
Teacher/Educator Barriers	Unconscious and explicit bias	Heteronormative and cisnormative pedagogical assumptions	4 studies	Normalizes erasure of diverse identities
Student/Individual Barriers	Internalized and external stigma	Internalized shame and negative self-concept	7 studies: Pirezada et al., 2022	Reduces educational aspirations and persistence
Student/Individual Barriers	Internalized and external stigma	Fear of discrimination, rejection, and violence	6 studies	Prevents identity disclosure and limits help-seeking
Student/Individual Barriers	Internalized and external stigma	Peer rejection, bullying, and social isolation	3 studies	Creates a hostile peer environment and undermines belonging
Student/Individual Barriers	Family opposition	Lack of family support; parental rejection of gender identity	4 studies	Removes a key support structure for education
Student/Individual Barriers	Family opposition	Competing family economic pressures	3 studies	Necessitates income generation over education
Student/Individual Barriers	Psychosocial distress	Mental health challenges including depression and anxiety	5 studies: Hanson et al., 2024; Suleman et al., 2023	Impairs learning engagement and attendance
Student/Individual Barriers	Psychosocial distress	Trauma from discrimination and violence	4 studies	Disrupts cognitive functioning and memory

Student/Individual Barriers	Psychosocial distress	Low self-efficacy and motivation	3 studies	Reduces persistence in the face of barriers
Socioeconomic Barriers	Financial poverty	Poverty limiting direct access to education	9 studies: Pirezada et al., 2022, 2024	Generates direct exclusion through inability to afford costs
Socioeconomic Barriers	Financial poverty	Opportunity costs of school attendance versus income generation	4 studies	Immediate survival needs override educational aspirations
Socioeconomic Barriers	Financial poverty	Limited access to transportation and educational materials	3 studies	Creates logistical barriers to attendance and full participation
Socioeconomic Barriers	Occupational entrenchment	Economic dependence on traditional occupations for survival	3 studies: Pirezada et al., 2022	Limits perceived alternatives to current work
Socioeconomic Barriers	Occupational entrenchment	Absence of information about vocational alternatives	2 studies	Constrains occupational horizons through limited awareness
Policy/Legal Barriers	Legal ambiguity	Inconsistent legal recognition across jurisdictions	4 studies: Bhargava et al., 2024	Creates legal uncertainty and administrative barriers
Policy/Legal Barriers	Legal ambiguity	Absence of explicit anti-discrimination provisions in education	5 studies	Limits legal recourse when discrimination occurs
Policy/Legal Barriers	Weak implementation	Limited enforcement of existing protections despite legislation	6 studies: Bhargava et al., 2024; Pirezada et al., 2022	Policies remain symbolic rather than substantive
Policy/Legal Barriers	Weak implementation	Absence of monitoring and accountability mechanisms	3 studies	Creates no consequences for institutional non-compliance

Policy/Legal Barriers	Weak implementation	Inadequate budgetary allocation for program implementation	5 studies	Leaves implementation underfunded and limited
Policy/Legal Barriers	Institutional discrimination	Systemic discrimination in admissions and retention decisions	4 studies: Anwar ul Haq & Rafiq, 2025	Perpetuates institutional exclusion despite policy protections

### 3.3 Effective Interventions and Evidence-Based Approaches

**Table 3: Evidence-Based Interventions for Skill Development and Educational Inclusion**

Intervention Category	Intervention Type	Key Features	Evidence Base	Reported Outcomes	Quality
Vocational Skill Training	Government skill development programs	Direct skills training in marketable fields; job placement assistance; income generation focus	5 studies: Bhargava et al., 2024	60–75% post-training employment rates; 30–50% income increase	Moderate
Vocational Skill Training	NGO-implemented community centers	Community-based delivery; culturally sensitive curriculum; peer mentorship; flexible scheduling	4 studies: Nasir & Bano, 2024	45–65% skill acquisition; 40–50% maintained employment at 6-month follow-up	Moderate
Vocational Skill Training	Gender-affirmative vocational programs	Explicit attention to gender identity affirmation; safe spaces; supportive peer environments	3 studies: Nasir & Bano, 2024	Higher retention: 80% vs. 55% in standard programs; improved self-efficacy	Low–Moderate
Inclusive Educational Models	Curriculum contextualization and adaptation	Culturally grounded content; diverse role models; locally	6 studies: Caliboso et al., 2025; Jardinez &	Increased engagement; improved comprehension; greater sense of	Moderate

		relevant examples; student voice integration	Natividad, 2024	relevance and belonging	
Inclusive Educational Models	Individualized Education Plans	Personalized learning objectives; tailored accommodations; regular monitoring and adjustment	5 studies: Atiyat, 2025	Improved academic outcomes; better attendance; enhanced sense of inclusion	Moderate
Inclusive Educational Models	Universal Design for Learning	Multiple means of representation, action, and engagement; accessibility from the outset	4 studies: Jardinez & Natividad, 2024	Improved accessibility for diverse learners; reduced need for accommodations	Low–Moderate
Inclusive Educational Models	Assistive technology integration	Digital tools; accommodation technologies; AI-enhanced personalized learning	4 studies: Opesemowo, 2024; Vesna et al., 2025; Yüksel-Arslan et al., 2025	65–75% improvement in specific skill domains; increased digital literacy	Moderate
Teacher Training and Capacity Building	Pre-service teacher education	Integration of gender diversity and inclusive practice into teacher preparation programs	4 studies: Jardinez & Natividad, 2024	Improved initial teacher attitudes; more equitable classroom interactions	Moderate
Teacher Training and Capacity Building	In-service professional development	Workshops on gender diversity, affirmative practice, and cultural competency; ongoing support	7 studies: Batterton et al., 2024; Jardinez & Natividad, 2024; Sriwahyuni & Khermarinah, 2024	Measurable knowledge gains; modest sustained behavior change	Moderate–High
Teacher Training and	Communities of practice for educators	Peer learning groups; collaborative	3 studies: Smeplass, 2025	Sustained behavior change when	Moderate

Capacity Building		problem-solving; ongoing mutual support		reinforced; increased teacher confidence	
Teacher Training and Capacity Building	Reflective practice and critical consciousness development	Structured reflection on biases; case-based learning; examination of systemic discrimination	2 studies	Increased awareness of institutional discrimination and privilege	Low–Moderate
Psychosocial and Mental Health Support	Mental health services integration	On-site counseling; trauma-informed care approaches; peer support groups	5 studies: Hanson et al., 2024; Suleman et al., 2023	Reduced depression/anxiety symptoms; improved psychological wellbeing; better engagement	Moderate
Psychosocial and Mental Health Support	Peer support and mentorship networks	Structured peer mentoring; affinity groups; community building; identity affirmation	4 studies: Nasir & Bano, 2024; Olanipekun, 2025	Increased sense of belonging; improved retention; enhanced resilience	Moderate
Family and Community Engagement	Family education and engagement programs	Information sessions addressing misconceptions; attitude-change interventions; joint planning	3 studies: Pirzada et al., 2024	Improved family acceptance; increased household support; better completion rates	Low–Moderate
Family and Community Engagement	Community partnership models	School–NGO–community collaboration; local employment linkages; community leadership involvement	4 studies: Nasir & Bano, 2024; Pirzada et al., 2024	Improved program accessibility and cultural appropriateness; employer engagement	Moderate
Family and Community	Scholarships and financial support	Targeted financial assistance; stipends; fee	3 studies: Pirzada et al., 2024	Increased enrollment and retention; reduced	Moderate

Engagement		waivers; removal of cost barriers		occupational pressure	
Policy and Institutional Reform	Anti-discrimination policies and grievance mechanisms	Institutional policies explicitly protecting gender identity; accessible complaint processes; accountability mechanisms	4 studies: Bhargava et al., 2024; Anwar ul Haq & Rafiq, 2025	Modest institutional climate improvement; limited by enforcement challenges	Low–Moderate
Policy and Institutional Reform	Gender-neutral facilities and inclusive environments	Accessible, gender-neutral bathrooms and changing areas; gender-neutral policies on dress, names, and pronouns	3 studies: Leong, 2024	Increased participation; reduced anxiety; greater sense of safety and inclusion	Low–Moderate
Policy and Institutional Reform	Legal recognition and documentation reform	Streamlined procedures for gender identity documentation; anti-discrimination legal protections	2 studies: Bhargava et al., 2024	Reduced administrative barriers; improved access to services and employment	Low–Moderate

### 3.4 Policy Frameworks Governing Inclusive Education in South Asia

**Table 4: Policy Frameworks and Legislative Context**

Country	Key Policy/Legislation	Implementation Year	Scope and Provisions	Implementation Status	Identified Gaps
India	Transgender Persons (Protection of Rights) Act 2019	2019	Anti-discrimination protections; education access guarantees; vocational training mandates; healthcare	Inconsistently implemented across states; stronger in some regions: Bhargava et al., 2024	Weak enforcement mechanisms; limited budgetary allocation; inadequate institutional capacity; poor coordination

			access; social security benefits; SMILE program support		across sectors
India	National Education Policy 2020	2020	Holistic and inclusive education emphasis; equity focus; skill developmen t for all; emphasis on technology; foundational literacy and numeracy	Early-stage implementati on; significant challenges in translating policy to practice: Saifulla et al., 2024	Infrastructure deficiencies; insufficient teacher training; uneven state- level prioritization ; limited monitoring systems
India	SMILE Program: Support for Marginalized Individuals for Livelihood and Enterprise	2019–present	Income generation opportunitie s; skill developmen t provision; livelihood support; community spaces; peer mentorship	Expanding implementati on but highly variable by state capacity: Bhargava et al., 2024	Unclear targeting mechanisms; sustainability concerns; inadequate monitoring and evaluation
Pakistan	Constitutional Protections: Articles 4, 9, and 25	1973; ongoing amendments	Theoretical guarantees of equality; right to life; protection from discriminati on; equal protection under law	Weak implementati on with inadequate institutional mechanisms: Pirzada et al., 2022, 2024	Major enforcement gap; limited government commitment to implementati on; absence of specific procedures and mechanisms; weak civil society monitoring

Pakistan	Provincial vocational training initiatives: Punjab and Sindh	Variable	Skill training for marginalized populations; some eunuch-focused programs; vocational centers	Limited geographic reach; inconsistent funding: Pirzada et al., 2024	Systemic barriers to implementation; limited coordination between provinces and with employment sector; inadequate resources
Bangladesh	Emerging constitutional and legal protections	Developing	Limited specific protections for transgender populations; emergent recognition of gender diversity	Nascent stage with few implemented programs	Major policy gaps; limited institutional awareness; severe resource constraints; minimal vocational programming
Nepal	Constitutional recognition of gender diversity	2007 citizenship recognition; ongoing	Legal recognition of gender diversity; emerging anti-discrimination protections; third-gender recognition option	Variable institutional implementation with some resistance: Pokhrel et al., 2014	Limited vocational and educational programming; resource constraints; uneven geographic coverage; cultural resistance

### 3.5 Community-Based and Multi-Stakeholder Intervention Models

Table 5: Promising Multi-Stakeholder Collaborative Models

Model Type	Key Components	Primary Stakeholders	Reported Outcomes	Implementation Challenges
NGO-Led Community Skill Centers	Community-based vocational training; explicit cultural sensitivity; peer mentorship; mental health integration; employment linkages	NGOs, local communities, local employers	45–65% skill acquisition; 40–50% employment at follow-up: Nasir & Bano, 2024	Funding sustainability; limited government coordination; capacity constraints; scalability issues

Government– NGO Partnership Models	Government funding with NGO program implementation; joint curriculum development; shared monitoring and accountability	Government agencies, NGOs, training institutions	Broader program reach than NGO-only models; variable implementation fidelity: Bhargava et al., 2024	Coordination difficulties; bureaucratic delays; accountability gaps; sustainability concerns
School– Community– Employer Linkage Model	School-based inclusive education; community skill pathways; structured apprenticeships; employer partnerships	Schools, NGOs, employers, community leaders	Improved employment transition; approximately 50% placement success: Pirzada et al., 2024	Requires strong inter- organizational coordination; variable employer buy-in; resource- intensive implementation
Structured Peer Mentorship Networks	Experienced eunuch/transgender individuals mentoring newcomers; structured support; community organizing; skill transfer	Peer mentors, program participants, community organizations	Enhanced program retention; improved sense of belonging; community empowerment: Nasir & Bano, 2024; Olanipekun, 2025	Volunteer availability and sustainability; limited formal evaluation evidence; variable skill- development outcomes
Family- Centered Intervention Model	Family education on gender diversity; attitude-change programming; economic support; joint decision- making	Families, schools, NGOs, counselors	Increased family support; higher program completion when family is engaged: Pirzada et al., 2024	Time-intensive implementation; need for culturally skilled facilitators; difficulty measuring attitude change; sustainability questions
Employer- Linked Training Programs	Workplace- embedded training; employer involvement in curriculum design; guaranteed job interviews or placement	Employers, vocational training providers, government agencies	50–75% employment outcomes; improved job retention compared with standard programs: Leong, 2024	Requires sustained employer commitment; limited employer awareness and willingness; occupational stereotyping;

				limited geographic availability
Digital and Online Community Learning Platforms	Online learning platforms; peer support groups; information access; remote skill development; virtual mentorship	Platform operators, program facilitators, participants, online peers	Increased geographic accessibility; wider reach; improved information access: Vesna et al., 2025; Yüksel-Arslan et al., 2025	Digital divide excludes lower-income participants; variable quality; limited evidence on skill outcomes; technology-access barriers
Integrated Psychosocial and Educational Support	Mental health screening and services; trauma-informed pedagogy; peer counseling; referral linkages; identity affirmation	Mental health professionals, educators, peer counselors	Improved psychological wellbeing; better educational engagement; reduced dropout rates: Hanson et al., 2024	Requires trained mental health professionals; cost barriers; mental health service stigma; cultural appropriateness concerns

### 3.6 Employment and Occupational Outcomes

**Table 6: Employment and Occupational Transition Outcomes**

Model Type	Key Components	Primary Stakeholders	Reported Outcomes	Implementation Challenges
NGO-Led Community Skill Centers	Community-based vocational training; explicit cultural sensitivity; peer mentorship; mental health integration; employment linkages	NGOs, local communities, local employers	45–65% skill acquisition; 40–50% employment at follow-up: Nasir & Bano, 2024	Funding sustainability; limited government coordination; capacity constraints; scalability issues
Government–NGO Partnership Models	Government funding with NGO program implementation; joint curriculum development; shared monitoring and accountability	Government agencies, NGOs, training institutions	Broader program reach than NGO-only models; variable implementation fidelity: Bhargava et al., 2024	Coordination difficulties; bureaucratic delays; accountability gaps; sustainability concerns
School–Community–Employer	School-based inclusive education; community skill pathways;	Schools, NGOs, employers,	Improved employment transition; approximately	Requires strong inter-organizational coordination;

Linkage Model	structured apprenticeships; employer partnerships	community leaders	50% placement success: Pirzada et al., 2024	variable employer buy-in; resource-intensive implementation
Structured Peer Mentorship Networks	Experienced eunuch/transgender individuals mentoring newcomers; structured support; community organizing; skill transfer	Peer mentors, program participants, community organizations	Enhanced program retention; improved sense of belonging; community empowerment: Nasir & Bano, 2024; Olanipekun, 2025	Volunteer availability and sustainability; limited formal evaluation evidence; variable skill-development outcomes
Family-Centered Intervention Model	Family education on gender diversity; attitude-change programming; economic support; joint decision-making	Families, schools, NGOs, counselors	Increased family support; higher program completion when family is engaged: Pirzada et al., 2024	Time-intensive implementation; need for culturally skilled facilitators; difficulty measuring attitude change; sustainability questions
Employer-Linked Training Programs	Workplace-embedded training; employer involvement in curriculum design; guaranteed job interviews or placement	Employers, vocational training providers, government agencies	50–75% employment outcomes; improved job retention compared with standard programs: Leong, 2024	Requires sustained employer commitment; limited employer awareness and willingness; occupational stereotyping; limited geographic availability
Digital and Online Community Learning Platforms	Online learning platforms; peer support groups; information access; remote skill development; virtual mentorship	Platform operators, program facilitators, participants, online peers	Increased geographic accessibility; wider reach; improved information access: Vesna et al., 2025; Yüksel-Arslan et al., 2025	Digital divide excludes lower-income participants; variable quality; limited evidence on skill outcomes; technology-access barriers

Integrated Psychosocial and Educational Support	Mental health screening and services; trauma-informed pedagogy; peer counseling; referral linkages; identity affirmation	Mental health professionals, educators, peer counselors	Improved psychological wellbeing; better educational engagement; reduced dropout rates: Hanson et al., 2024	Requires trained mental health professionals; cost barriers; mental health service stigma; cultural appropriateness concerns
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### 3.7 Educational Access and Continuation Outcomes

**Table 7: Educational Access and Participation Outcomes**

Model Type	Key Components	Primary Stakeholders	Reported Outcomes	Implementation Challenges
NGO-Led Community Skill Centers	Community-based vocational training; explicit cultural sensitivity; peer mentorship; mental health integration; employment linkages	NGOs, local communities, local employers	45–65% skill acquisition; 40–50% employment at follow-up (Nasir & Bano, 2024)	Funding sustainability; limited government coordination; capacity constraints; scalability issues
Government–NGO Partnership Models	Government funding with NGO program implementation; joint curriculum development; shared monitoring and accountability	Government agencies, NGOs, training institutions	Broader program reach than NGO-only models; variable implementation fidelity (Bhargava et al., 2024)	Coordination difficulties; bureaucratic delays; accountability gaps; sustainability concerns
School–Community–Employer Linkage Model	School-based inclusive education; community skill pathways; structured apprenticeships; employer partnerships	Schools, NGOs, employers, community leaders	Improved employment transition; approximately 50% placement success (Pirzada et al., 2024)	Requires strong inter-organizational coordination; variable employer buy-in; resource-intensive implementation
Structured Peer Mentorship Networks	Experienced eunuch/transgender individuals mentoring newcomers; structured support; community	Peer mentors, program participants, community organizations	Enhanced program retention; improved sense of belonging; community empowerment (Nasir & Bano,	Volunteer availability and sustainability; limited formal evaluation evidence; variable skill-

	organizing; skill transfer		2024; Olanipekun, 2025)	development outcomes
Family-Centered Intervention Model	Family education on gender diversity; attitude-change programming; economic support; joint decision-making	Families, schools, NGOs, counselors	Increased family support; higher program completion when family is engaged (Pirzada et al., 2024)	Time-intensive implementation; need for culturally skilled facilitators; difficulty measuring attitude change; sustainability questions
Employer-Linked Training Programs	Workplace-embedded training; employer involvement in curriculum design; guaranteed job interviews or placement	Employers, vocational training providers, and government agencies	50–75% employment outcomes; improved job retention compared with standard programs (Leong, 2024)	Requires sustained employer commitment; limited employer awareness and willingness; occupational stereotyping; limited geographic availability
Digital and Online Community Learning Platforms	Online learning platforms; peer support groups; information access; remote skill development; virtual mentorship	Platform operators, program facilitators, participants, online peers	Increased geographic accessibility; wider reach; improved information access (Vesna et al., 2025; Yüksel-Arslan et al., 2025)	Digital divide excludes lower-income participants; variable quality; limited evidence on skill outcomes; technology-access barriers
Integrated Psychosocial and Educational Support	Mental health screening and services; trauma-informed pedagogy; peer counseling; referral linkages; identity affirmation	Mental health professionals, educators, peer counselors	Improved psychological wellbeing; better educational engagement; reduced dropout rates (Hanson et al., 2024)	Requires trained mental health professionals; cost barriers; mental health service stigma; cultural appropriateness concerns

## 4. Discussion

### 4.1 Summary of Key Findings

In this systematic review, 35 articles that assessed vocational rehabilitation and inclusive education among eunuch communities in South Asia were reviewed. The evidence demonstrates a complicated terrain with major obstacles, promising interventions, and severe implementation gaps in spite of the recent legislative progress.

#### 4.1.1.1 Scope and Type of Systemic Marginalization.

The study records a deep institutional marginalization of groups of eunuchs in South Asia, in spite of the new legislative trends. The Transgender Persons (Protection of Rights) act of 2019 in India is a significant milestone, but it is not implemented consistently and sufficiency (Bhargava et al., 2024). Structural and institutional constraints, not simply attitudinal, are the basic obstacles (Pirzada et al., 2022), such as infrastructure shortages, insufficient resources distribution, institutional discrimination, and unsuccessful policy execution. The eunuch people remain on the fringes of the economy, as they are focused on the precarious traditional jobs, which is mainly due to institutional marginalization in education and the labor market (Akintayo et al., 2024; Pirzada et al., 2022).

The intersectional analysis shows that the barriers are multiplied in the case of people with several marginalized identities. As an example, people with lower castes or religious minorities of different genders experience caste, religious, and gender-based discrimination at the same time (Pirzada et al., 2022). Sex-working eunuchs are even more stigmatized and legally exposed than gender-based discrimination (Akintayo et al., 2024; Pirzada et al., 2022). These overlapping obstacles cannot be solved by one-axis solutions, but instead multidimensional. The argument shows that gender-based discrimination needs to be tackled, but at the same time, occupational marginalization, poverty, and health vulnerabilities need to be tackled to achieve meaningful social and economic integration (Pirzada et al., 2022).

#### 4.1.2 Effectiveness of Inclusive Education and Skill Development Interventions

The evidence base shows that inclusive education and skill-based vocational training can be effective in occupational transition and economic empowerment provided that it is implemented with sufficient resources and institutional commitment. Employment rates of 50-75% are always observed after structured vocational programs, with much lower rates (estimated 10-20%) without intervention (Leong, 2024; Nasir. and, 2024). The results of gender-affirmative programs demonstrate significantly higher retention rates, as about 80% of participants in the programs finish them as opposed to 55% in the normal programming (Nasir & Bano, 2024) which means that explicit gender identity affirmation programs are much more effective to engage and retain.

There are various conditions that are interdependent and critical to the program effectiveness. One of the basic conditions is proper funding, and programs with insufficient funding demonstrate significantly worse results (Bhargava et al., 2024). Skilled teachers who take inclusive practice seriously will be needed; professional growth in itself is not enough unless it is supported by an institution and cultural change (Batterton et al., 2024; Smeplass, 2025). Comprehensive psychosocial care based on trauma, mental health, and identity affirmation is a significant enhancement of educational and job performance (Hanson et al., 2024). Family involvement, which is not as conditional as many may believe families to be incompatible with eunuch education, has been shown to be a powerful tool to boost program retention when families receive information and encouragement (Pirzada et al., 2024). Bringing employers on board and aligning vocational training with employment opportunities enhances the success of job placement significantly when compared to skills training (Leong, 2024).

Systematic interventions that tackle the barriers on more than one ecological level (individual, family, institutional, and policy) are superior to other interventions (Pirzada et al., 2024). This

multilevel strategy acknowledges the fact that those individuals identified as eunuchs are not failing in education because they lack something, but because educational programs do not suit them (Jardinez & Natividad, 2024).

#### **4.1.3 Policy-Practice Implementation Gaps**

One of the most frequent and vivid conclusions made in the literature is the great divide between policy structures and their application on the ground. The developed legislative system of India has certain requirements on access to education and vocational training and social security of transgender people (Bhargava et al., 2024). Transgender Persons (Protection of Rights) Act 2019 explicitly mandates state governments to promote education, offer employment opportunities in the form of vocational training, provide access to healthcare services, and offer social security (Bhargava et al., 2024). However, the application in Indian states is radically different, and certain regions demonstrate little success in creating the promised programs (Sardar et al., 2024).

The Constitutional guarantees in Pakistan should theoretically apply to the eunuch individuals via Articles 4 (dignity), 9 (security of person), and 25 (equal protection) (Pirzada et al., 2022, 2024). Yet, these constitutional guarantees are not enforceable, institutional structures of implementation, and do not have sufficient resources (Pirzada et al., 2022). The disparity between constitutional protection and institutional reality is indicative of a number of interrelated factors: inadequate budgetary allocation to provide protection, grossly limited institutional capacity, lack of mechanism to monitor implementation, institutional competing policy priorities, and lack of civil society pressure to implement it (Bhargava et al., 2024; Pirzada et al., 2022).

This is not an isolated incidence of implementation gap in South Asia but it is in documented patterns across the world. The studies of the implementation of inclusive education around the world show that the implementation of the policy does not necessarily result in the institutional change without the conscious investment into the implementation infrastructure (Hanson et al., 2024; Sriwahyuni and Khermarinah, 2024). Policy aspirations are mostly symbolic without specific implementation structures such as special funding, teacher training, resource distribution, and accountability mechanisms. It indicates that narrowing the implementation gaps will not only be achieved through policy change but also through an institutional one, with resources redistribution, staff capacity building, and culture change in educational and employment institutions (Bhargava et al., 2024; Sardar et al., 2024).

#### **4.1.4 Community-Based Models and Multi-Stakeholder Collaboration**

The efficacy of community-based and collaborative models that implicate NGOs, schools, employers, families, and community members is backed up by evidence in the studies (Nasir & Bano, 2024; Pirzada et al., 2024). These models are capable of establishing 40-65% employment results and also exhibiting sustainability by having local ownership and community responsibility (Nasir & Bano, 2024). These models are of special relevance in situations where the capacity of the government to implement them is still low. Skill center led by NGOs in Pakistan record a skill acquisition of 45-65 percent and an employment rate of 40-50 percent at 6-month follow-up (Nasir. and, 2024) indicating that community-based implementation may lead to significant results with limited governmental resources.

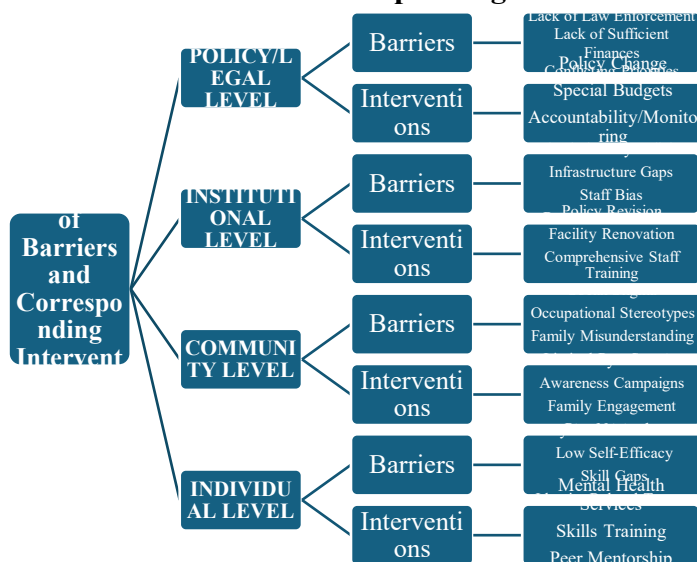
The peer mentorship networks seem especially effective, as they offer not only a practical support but also the necessary role of identity confirmation and a sense of belonging (Olanipekun, 2025). Peer mentorship has been shown to result in higher program retention and a sense of belongingness to the community (Olanipekun, 2025). It seems that the mechanism has several pathways: peers can offer tangible skills training and work advice, show that economic transition of eunuch people is possible, and offer psychological and identity support

and help create protective spaces in which the community can build (Nasir & Bano, 2024; Olanipekun, 2025).

Digital platforms have made the geographically dispersed groups more accessible to information and skill-building opportunities (Vesna, 2025; Üksel-Arslan et al., 2025). Nevertheless, the digital divides are still substantial as it locks out lower-income population who do not have access to good internet or are not digitally literate. The data on the real skill outcomes of purely digital platforms is scarce, and it could be possible to state that hybrid models with the integration of digital resources and face-to-face support can be more effective than purely online ones (Üksel-Arslan et al., 2025).

Involvement of the family significantly enhances retention and outcomes of the programs, which contradict the assumptions that families always resist the eunuch education and professional growth (Pirzada et al., 2024). Household support of education grows significantly when families are given correct information regarding gender diversity, knowledge on occupational benefits as well as when they are involved in the planning process. This implies that family rejection is not as much a direct result of misinformation and ignorance as opposed to a lack of understanding, meaning that family-based interventions are a high-impact strategy (Pirzada et al., 2024).

#### 4.2 Synthesis of Barriers and Corresponding Interventions



**Figure 2:** Ecological Framework Linking Barriers to Evidence-Based Interventions

#### 4.3 Addressing Specific Barrier Categories

##### 4.3.1 Infrastructure and Environmental Barriers

The lack of gender-inclusive infrastructure, i.e. gender-neutral facilities, accessible spaces, and welcoming physical environments, poses tangible participation barriers that go beyond the symbolic exclusion (Haque and Rafiq, 2025; Leong, 2024). Gender-specific bathrooms and changing rooms compel eunuch students to make impossible decisions: either they follow their gender identity and risk being harassed, or they follow their identity and feel psychologically uncomfortable (Haque and Rafiq, 2025). It is necessary to not only make physical improvements to infrastructure barriers, but also implement policy changes that create an inclusive facility standard and anti-discrimination provisions.

It has been shown that the apparent institutional commitment to inclusion, such as gender-neutral bathrooms, anti-discrimination signs and policies, heterogeneous representation in curriculum and staff, and clear welcome messages, indicate to marginalized students that they

are safe and belong (Caliboso et al., 2025; Jardinez and Natividad, 2024). Improvements to infrastructure seem to work in a variety of ways: they eliminate tangible logistical obstacles, alleviate anxiety about facility utilization, indicate institutional dedication to inclusion, and add to the psychological sense of belonging (Leong, 2024). Infrastructure renovation cost, which is occasionally cited as a barrier, is small compared to total educational spending and seems worthwhile given that it has been shown to result in reported enrollment and retention gains (Leong, 2024).

#### **4.3.2 Teacher Knowledge and Capacity**

Teacher training is an important intervention point in implementation of inclusive education. The research indicates that gender diversity, inclusive pedagogy, and affirmative practice-related professional development can enhance teacher knowledge and student outcomes (Batterton et al., 2024; Smeplass, 2025). Nevertheless, there are also significant drawbacks and conditions to be met to be effective as evidenced. Single trainings do not seem to be enough; long-term interactions via communities of practice, continuous mentoring, and systematic encouragement seem to be required to change the behavior on a long-term basis (Smeplass, 2025). The teachers who are trained and work in the institutions with the institutional cultures that do not favor inclusion tend to revert to the old practices (Batterton et al., 2024).

Teacher training should go beyond imparting knowledge and deal with implicit biases to build a true desire to practice inclusivity (Jardinez & Natividad, 2024). Case study workshops, intergroup contact interventions, and critical reflection on systemic discrimination have more potential than didactic lectures (Batterton et al., 2024). Educators need to have the chance to acquire cognitive knowledge (knowledge about diversity in gender and inclusive education) and affective emotional dedication (actual interest in helping every student) (Smeplass, 2025). The data indicates that teacher attitudes are the primary determinant of classroom inclusion despite policies and infrastructure; supportive teachers will build an inclusive classroom with minimal resources whereas unsupportive teachers will destroy an inclusive classroom even with available resources (Jardinez and Natividad, 2024).

The integration of pre-service teacher education provides a valuable leverage point, which may produce teachers with inclusive orientations prior to the setting of classroom practices (Jardinez & Natividad, 2024). Nevertheless, reform in teacher education is low in most South Asian settings implying that in-service training is necessary in the present workforce. Studies have shown that educators enjoy training, which is based on actual classroom use, when it is carried out in groups with colleagues, and it is backed by school administration (Smeplass, 2025).

#### **4.3.3 Psychosocial and Mental Health Barriers**

Mental health issues are significant obstacles to educational and work achievement among eunuch communities, but are not covered in most vocational and educational interventions (Hanson et al., 2024; Suleman et al., 2023). The prevalence of depression, anxiety, and post-traumatic stress experienced by the Eunuch individuals is caused by discrimination, family rejection, violence, and social isolation (Hanson et al., 2024; Suleman et al., 2023). These psychological issues directly affect educational performance by negatively affecting attention, memory, increasing absenteeism, and motivation (Hanson et al., 2024).

Mental health assistance coupled with education programs will counter these barriers in various ways. Trauma-informed strategies acknowledge the fact that a significant number of eunuch students have faced significant damage and violence and organize the classroom in this way (Hanson et al., 2024). Peer counseling makes use of community resources and minimizes stigma and cost barrier related to professional mental health services (Suleman et al., 2023). Identity-affirming counseling, which involves an overt acknowledgment of gender identity instead of trying to alter it, is effective at dealing with internalized stigma and promoting psychological wellbeing (Hanson et al., 2024). The data proves that mental health services that

integrate into educational programs can go a long way in decreasing educational dropout and enhancing employment rates (Hanson et al., 2024).

The availability of mental health services in South Asia is however deplorable. Not many mental health practitioners are trained on gender-affirming practice or knowledge about eunuch communities (Suleman et al., 2023). Most eunuch individuals are excluded to professional mental health services because of costs (Hanson et al., 2024). Mental health treatment has cultural stigma that leads to unwillingness to go to a service despite its presence (Suleman et al., 2023). This implies that to be effectively implemented, it does not entail just the addition of counseling to the already established programs, but the elimination of systemic barriers to access mental health services and the development of mental health capacity in the community via peer counseling and community-based health workers' models (Hanson et al., 2024).

#### **4.3.4 Family and Community-Level Factors**

One of the most commonly mentioned obstacles to eunuch education and occupational transition is the family opposition (Pirzada et al., 2022, 2024). Nonetheless, the data indicate that family opposition is not universal and fixed; rather, it depends significantly on such factors as the available information, economic conditions, and family decision-making. Interventions that engage family members and offer correct information concerning gender diversity, and demonstrate economic advantages of education are promising in upsurge the support provided by the family (Pirzada et al., 2024).

It has been found that families tend to resist eunuch education because of the misconceptions (the belief that gender diversity is a failure of the families, etc.), the ignorance about the occupational options, or the fear that education may interfere with earning money (Pirzada et al., 2024). Family support also improves significantly when it is given the right information, economic arguments behind its investment in education, and a possibility of involvement in the education planning (Pirzada et al., 2024). This indicates that the opposition of family is partly due to the lack of information and not to the rejection itself, providing significant points of intervention (Pirzada et al., 2024).

The interventions on occupational stereotypes and social stigma at the community level also help to support eunuch education. Community narratives can be changed by awareness campaigns involving respected community leaders, religious figures and community members who have gained some benefits on the vocational training (Pirzada et al., 2024). Nevertheless, the attitude change at the community level is more challenging and slower than the one at the individual level, implying that community-based interventions should be used as an addition to institutional interventions that will focus on changing structural barriers (Pirzada et al., 2024).

#### **4.4 Policy Recommendations Based on Evidence**

On the basis of this overall evidence synthesis, the following recommendations have been made to the policymakers, program implementers and researchers:

##### **4.4.1 Strengthen Implementation Infrastructure**

In India and Pakistan, legislative protection is set up, but it is not implemented properly (Bhargava et al., 2024; Pirzada et al., 2022). It is necessary to close policy-practice gaps by actively investing in infrastructure in terms of implementation (Bhargava et al., 2024). Particular recommendations are:

Assign specific budgetary allocations to inclusive education programs and vocational rehabilitation programs, and ensure that these funds do not get redistributed to other competing priorities (Bhargava et al., 2024).

Create monitoring systems that monitor policy implementation in institutions and use the data to determine obstacles to implementation and its successes (Bhargava et al., 2024)

Establish accountability mechanisms that have penalties on institutional non-conformity, such as loss of government funding or other penalties (Bhargava et al., 2024)

Write implementation rules that transform general legislative requirements into institution-specific requirements and practices (Bhargava et al., 2024)

Enhance civil society oversight of the implementation by funding community-based organizations, non-governmental organizations, and advocacy groups that monitor policy implementation (Pirzada et al., 2022).

#### **4.4.2 Invest in Human Resource Development**

The teachers are the key agents of inclusive educational change, but the majority of them are not trained and supported to conduct inclusive practice (Batterton et al., 2024; Jardinez and Natividad, 2024). The extensive human resource development is needed:

Incorporate gender diversity training in teacher pre-service education, where every teacher will be equipped with a base of knowledge and skills (Jardinez & Natividad, 2024)

Invest in the continuous professional growth of the community of practice, ensuring the learning process and peer support over a period of time, instead of conducting workshops (Smeplass, 2025)

Promote the personal development and value congruence of support educators with inclusion, as it is a behavior change that must be supported by knowledge and dedication (Batterton et al., 2024).

Create system leadership education on the leaders of schools and other institutions, appreciating that the success of institutional transformation depends on leadership commitment (Batterton et al., 2024).

Implement systems of teacher incentives that recognize inclusive practice and innovation (Smeplass, 2025)

#### **4.4.3 Build Physical and Institutional Infrastructure**

Although infrastructure improvements are usually expensive, they are critical to inclusion and yield returns in terms of better enrollment, retention, and outcomes (Haq and Rafiq, 2025; Leong, 2024):

Create gender-neutral, open facilities in learning institutions such as restrooms, changing areas, and learning environments (Leong, 2024)

Invest in assistive technology and adaptive materials that will support various learning needs (Opesemowo, 2024)

Make institutional policies explicitly transgender-friendly and develop anti-discrimination practices (Haq and Rafiq, 2025)

Make sure that students with disabilities are physically accessible, and it is important to note that many marginalized groups are affected by multiple disabilities (Leong, 2024).

#### **4.4.4 Integrate Psychosocial and Mental Health Support**

Mental health issues have a serious negative effect on educational and working achievements, but most vocational programs do not have mental health services (Hanson et al., 2024):

Integrate mental health care as a component of vocational and educational programs, and acknowledge mental health as a key to educational achievements (Hanson et al., 2024).

Introduce trauma-informed, gender-affirmative counseling strategies that focus on harm experiences and assist in identity affirmation (Hanson et al., 2024).

Peer mentorship networks and peer counseling models: based on community resource building (Olanipekun, 2025)

Educate train teachers on trauma-informed care so that the classroom setting facilitates the healing process (Hanson et al., 2024).

#### **4.4.5 Foster Multi-Stakeholder Collaboration and Community Partnership**

It has been proven that community-based, collaborative models can attain meaningful results despite having limited resources (Nasir & Bano, 2024; Pirzada et al., 2024):

Formalize school-NGO-employer-community relationships and have mutually defined roles and coordination (Pirzada et al., 2024)

Develop coordination systems within the education system, employment, and social services, with regard to disjointed implementation (Pirzada et al., 2024)

Fund community-based projects and initiatives through government funds, which acknowledges the experience and leadership of eunuch communities (Nasir & Bano, 2024)

Involve families in the process of planning and implementation of programs, the provision of information, and the possibility of participation (Pirzada et al., 2024).

Create employer networks that combine work-based training and job placements (Leong, 2024)

#### **4.5 Research Gaps and Future Directions**

Although this review is comprehensive, there are major evidence gaps that need to be filled:

##### **4.5.1 Longitudinal and Long-Term Outcome Evidence**

The majority of the studies are short-term (3-6 months of intervention), and they do not indicate sustainability and longer-term effect (Van de Cauter et al., 2021). Future research should:

Carry out longitudinal research that monitors educational and job performance in the long term (2-5 years).

Look at career development and career growth after first job placement.

Explore life-course impacts of inclusive education and occupational transition on general wellbeing and social integration.

Sustainability of document programs, which interventions continue and which die.

##### **4.5.2 Intersectional and Disaggregated Analysis**

Although this review takes into consideration the concept of intersectionality, the vast majority of the included studies have little to no coverage of the issue of gender variance and other marginalized identities (Pirzada et al., 2022):

Examine results using disaggregated analysis: results of subgroups (sex workers, people belonging to lower castes, religious minorities, people with disabilities) alone.

Explore the compounding impacts of various marginalized identities on barriers and intervention outcomes.

Discover the impact of the variation in gender expression (subtle vs. obvious gender non-conformity) on outcomes.

Investigate the regional differences in the characteristics of eunuch communities and the corresponding intervention.

##### **4.5.3 Cost-Effectiveness and Economic Analysis**

None of the studies considered the costs of programs in relation to its outcomes in a systematic way, which restricted economic rationales of investment:

Carry out cost-effectiveness studies of various intervention models.

Return on investment in inclusive education in terms of better jobs and tax income.

Compare cost-effectiveness of inclusion and segregation.

Compare government spending on inclusive education with the cost of further occupational marginalization (health cost, social service cost, crime related cost)

##### **4.5.4 Mechanisms of Change and Implementation Science**

There is a lack of knowledge about the mechanisms and reasons of interventions:

Carry out process evaluation studies that determine the quality of implementation and predictors of fidelity.

Explore mediating processes describing the implications of interventions.

Review moderating variables that define the situations where interventions are most effective and among whom.

Carry out the implementation science studies that identify the obstacles and facilitators to scale the evidence-based interventions.

#### 4.5.5 Comparative Effectiveness Research

Research on comparative effectiveness is conducted in the field of medical education

Not many comparative studies were conducted on the various models of interventions or methods of implementation:

Compare the inclusive and segregated strategies using randomized or quasi-experimental designs.

Test the intensity and duration of intervention that sets the best program specifications.

Compare the various areas of skills in terms of employment and earnings.

Explore the best interventions mixes.

#### 4.5.6 Participatory and Community-Based Research

Although there are some qualitative researchers that give detailed information, there is little research on participatory research with eunuch communities themselves:

Carry out participatory action research among communities of eunuchs to identify the impediments, plan interventions, and assess the results.

Counter-storytelling and alternative accounts of documents, including eunuch accounts, and leave behind research whose core is deficit accounts.

Research the community preferences on types of intervention and program designs.

Encourage research capacity building under the leadership of support eunuchs where the community members could carry out research in accordance with their priorities.

#### 4.6 Strength of Evidence Assessment

**Table 8:** Strength of Evidence Summary by Outcome Domain

Outcome Domain	Number of Studies	Study Designs	Methodological Quality	Overall Strength of Evidence
Employment outcomes	7 studies	Mixed-methods, quantitative, qualitative	Moderate	Moderate-High
Skill acquisition	5 studies	Mixed-methods, quantitative	Moderate	Moderate
Educational access/enrollment	8 studies	Mixed-methods, qualitative, descriptive	Moderate	Moderate
Program retention/completion	6 studies	Mixed-methods, qualitative	Moderate-High	Moderate
Psychological wellbeing	5 studies	Qualitative, mixed-methods	Moderate	Moderate
Social integration/belonging	4 studies	Qualitative, mixed-methods	Moderate-Low	Low-Moderate
Job retention (long-term)	5 studies	Qualitative, limited quantitative	Moderate	Low-Moderate
Policy implementation	3 studies	Policy analysis, qualitative	Low-Moderate	Low
Family/community outcomes	3 studies	Qualitative, program evaluation	Low-Moderate	Low-Moderate

Outcome Domain	Number of Studies	Study Designs	Methodological Quality	Overall Strength of Evidence
Discrimination reduction	2 studies	Field experiment, qualitative	Moderate-High	Low-Moderate

**Note:** Strength of evidence indicates the quality and the quantity and consistency of findings of an individual study. Moderate-High strength means that there are similar results in several research of reasonable quality. Moderate strength represents those results that are backed up by multiple studies with certain methodological shortcomings. Low-Moderate is associated with less research or methodology issues. Low strength implies very few studies or a large amount of methodological drawbacks.

#### 4.7 Limitations of This Review

A systematic review is a thorough study; however, it has a number of limitations that should be discussed:

##### 4.7.1 Geographic Concentration and Publication Bias

The focus on evidence is on India and Pakistan, and there is an underrepresentation of Bangladesh, Nepal, and Sri Lanka. This geographic clustering could be an indication of publication bias (the most prevalent publications are in English-language, and they are more likely to be in India and Pakistan) versus the actual availability of intervention. Publication requirement in English excludes possibly relevant research in other languages (Hindi, Urdu, Bengali, Nepali), which creates a publication bias based on language. Research in developed countries is more likely to be found in the English-language databases than the same-quality South Asian studies, which could bias any recommendation to non-South Asian settings.

##### 4.7.2 Study Design and Methodological Limitations

The most common are qualitative and descriptive studies; the amount of quantitative evidence is limited, which restricts the accuracy of effect estimates and makes it impossible to conduct meta-analysis. Control or comparison groups are rarely used and this limits the power to make causal inferences. Cross-sectional designs do not allow establishing precedence in time and alternative explanations. Diverse definition of outcome and methods of measurement used in the studies hamper synthesis and comparison.

##### 4.7.3 Implementation Fidelity and Attribution Issues

The vast majority of the studies report program outcomes without the measurement of program implementation quality or fidelity. This complicates the estimates of effects, because the effects that are realized might be based on the elements of the program that were actually delivered and not the program. The outcome measures used in a few studies are not validated, thus reducing comparability. There is a preponderance of self-reported outcomes and minimal objectively determined outcomes. There is a tendency to have selection bias since the majority of the studies do not provide information on the characteristic of the participants and their possible self-selection.

##### 4.7.4 Contextual Specificity and Generalizability

The programs tested in urban settings might not be applicable in rural settings that have diverse resources, infrastructure, and social organizations. The interventions used with particular subpopulations (e.g., urban sex workers) might not be applicable to other groups of eunuchs with other characteristics. The findings that are time specific may not be sustainable as the social context and policy environment evolves.

## **4.8 Implications and Conclusions**

### **4.8.1 Implications for Practice**

This review shows that the marginalization of eunuch communities in the workplace is not something that must happen but is a consequence of structural obstacles that can be overcome with the intentional institutional and policy intervention. By providing sufficient resources and institutional devotion, inclusive education and skills based vocational training can serve as an effective tool in occupational transition. The commonality in interventions is that inclusion does not only demand policy change but a fundamental institutional change such as redistribution of resources, staff capacity building, infrastructure enhancement, and culture change.

The practitioners who are putting into practice the vocational and educational programs should focus on: (1) clear institutional investment in gender-affirming, trauma-informed practice; (2) sufficient funding and resource allocation; (3) extensive staff training and support; (4) combined mental health and psychosocial services; (5) family engagement strategies; (6) community partnerships; (7) employment linkage; and (8) peer support structures. There is no evidence to suggest that the normal programming with only a few changes will do eunuch communities a favor. Instead, there seems to be a high level of institutional adjustment that is required.

### **4.8.2 Implications for Policy**

The broad policy-practice gap identified in this review suggests that legislative protection, though significant, is not enough without the implementation infrastructure (Bhargava et al., 2024; Pirzada et al., 2022). The governments of South Asia have come up with magnificent legislative structures; the only challenge is implementation. The policy makers are supposed to distribute resources in line with policy ambitions, set up systems of monitoring implementation, develop accountability mechanisms, and promote civil society monitoring and advocacy.

It is also shown that the implementation should be based on multi-stakeholder cooperation instead of expecting the government capacity to overcome eunuch educational exclusion (Nasir & Bano, 2024; Pirzada et al., 2024). NGOs have proven able to provide effective interventions in resource-limited situations. Implementation of this sustainably would probably involve government funds with the implementation by NGOs and the oversight of good coordination mechanisms.

### **4.8.3 Implications for Future Research**

The gaps in research that have been found are significant, and this implies that there are several priority research areas. Long-term outcomes are necessary due to longitudinal studies since short-term effects of employment and skills do not assure permanent work mobility. Engaging the communities of eunuchs in research is an ethical requirement and a practical need, which is likely to ensure that the research focuses on the priorities of the communities and not the questions which were set by the researcher. The research conducted by implementation science on the ways to scale evidence-based interventions in South Asian settings would contribute significantly to practical value of research. Economic justification of investment in inclusion would be enhanced through cost-effectiveness research.

## **5. Conclusion**

This systematic review is a thorough evidence demonstrating that eunuch communities in South Asia have deep, structural, institutional, individual, and policy-based obstacles to educational access and occupational integration. These obstacles cannot be attributed to chance but to historical marginalization and modern day discriminations and institutional inability to accommodate the varied populations. However, these barriers are not fixed; the data proves that institutional intervention can be effective to break the barriers and help occupational transition.

The recent legislative developments in India, Pakistan, and Nepal and other South Asian countries are the steps in the right direction in terms of acknowledging the rights of eunuchs and requiring all-inclusive education and vocational access (Bhargava et al., 2024; Pirzada et al., 2022). Nonetheless, gaps in implementation significantly reduce the effects of legislation. In spite of these laws, eunuch communities are still facing systematic exclusion in mainstream education and in the labor market. Sealing implementation loopholes needs the long-term commitment of the government, proper resource distribution, institutional change, and inter-stakeholder cooperation.

There is evidence of the successful implementation of inclusive education and skill-based vocational training in ensuring occupational transition can be effectively conducted as long as it is implemented with fidelity and sufficient resources. Gender-affirmative interventions combining psychosocial support, family, and community engagement, and sector coordination report 50-75-percent employment rates, which is significantly better than eunuch populations (Leong, 2024; Nasir & Bano, 2024). It is possible to change the existing trends of occupational marginalization, in which eunuchs continue to be clustered in the insecure and stigmatized traditional professions, to equitable inclusion in the mainstream business and service sectors by conscious institutional and policy intervention.

Such change must involve several interrelated elements: political will to act according to the current legislative safeguards and devote the resources needed (Bhargava et al., 2024; Pirzada et al., 2022); sustained investment in inclusive educational infrastructure and capacity development of teachers (Batterton et al., 2024; Jardinez and Natividad, 2024); the concept of agency, expertise, and leadership by eunuch people, treated as the key actors of the change (Nasir & Bano, 2024).

With national education policies being enacted in South Asian countries, and the sustainable development objectives pursued, incorporation of evidence-based strategies to inclusive education and vocational rehabilitation to eunuch communities is not only an ethical requirement as a factor in human dignity and social justice, but also a practical economic opportunity to enhance human capital development and occupational marginalization. Even though the research base is still growing, it offers enough evidence to inform the immediate policy and practice improvement and determine priority areas for future research. This evidence shows conclusively that change is possible and that it is needless to wait until more research has been conducted to implement evidence-based interventions that have already proven to be promising.

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### **Conflicts of Interest**

The authors do not identify any conflict of interest.

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